SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)	
HUMANE SOCIETY LEGISLATIVE FUND	

Full Name (Last, First, Middle Initial) of Payee		Date	
Mike Markarian		M M / D D / Y Y Y Y 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Mailing Address		1 0 2 2 2 0 0 8 Amount	
1206 Maryland Avenue, NE			
City State	Zip Code	21.94	
Washington DC	20002		
Purpose of Expenditure Staff Time	Category/	Office Sought: X House State: AK	
	Туре	House Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure Ethan Berkowitz): 	Check One: X Support Oppose	
Calendar Year-To-Date Per Election	.00	2008	
for Office Sought	.00	Other (specify)	
Full Name (Last, First, Middle Initial) of Payee		Date	
Kristian Connolly		1,0 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1712 Corcoran St., NW		Amount	
Apt #6		2.45	
City State Washington DC	Zip Code 20009		
Purpose of Expenditure		Office Sought: Y House Out MO	
Staff Time	Category/ Type	State: WO	
Name of Federal Candidate Supported or Opposed by Expenditure		House Senate District: 06	
Sam Graves	<i>i</i> .	Check One: Support X Oppose	
		Disbursement For: Primary X General	
Calendar Year-To-Date Per Election	.00	2008	
Tot Office Sought			
Full Name (Last, First, Middle Initial) of Payee Mike Markarian		Date	
		1 0 2 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1206 Maryland Avenue, NE		Amount	
	7ia Cada	21.94	
City State Washington DC	Zip Code 20002		
Purpose of Expenditure	Category/	Office Sought: X House State: MO	
Staff Time	Type	House	
Name of Federal Candidate Supported or Opposed by Expenditure): :	President District: 06	
Sam Graves		Check One: Support X Oppose	
Calendar Year-To-Date Per Election		Disbursement For: Primary X General	
for Office Sought	.00	2008 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		46.33	
(b) SUBTOTALof Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
(carry total from last page forward to Line 7)			